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APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

GERMANY 199 34 976.2 07/26/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/13/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 4	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				

Verified and Acknowledged

Examiner's Signature _____ Initials _____

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TITLE

MEDICAL INSTRUMENT WITH A NON-CONTACT READABLE DATA CARRIER

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